



# City of Berlin Fire Department

## Inspection Division

263 Main Street

Berlin, New Hampshire 03570

Business: (603) 752-3135 Facsimile: (603) 752-8583

### FIRE PREVENTION PERMIT APPLICATION

<b>2 SETS PLANS ATTACHED:</b>	<b>YES/NO</b>	<b>PERMIT</b>		<b>PERMIT #:</b>	
<b>TYPE OF PERMIT: PLEASE CHECK APPROPRIATE FIELD</b>					
SPRINKLER SYSTEMS	\$55 AND UP		GROUP DAY CARE HOMES 7-12 CHILDREN	\$60	
OTHER FIRE SUPPRESSION SYSTEMS	\$205.50 AND UP		DAY CARE CENTERS 13 + CHILDREN	\$82.50	
MODIFICATIONS TO EXISTING SYSTEMS	\$112.50		FOSTER CARE INSPECTION	\$41.25	
FIRE ALARM SYSTEMS	\$112.50 AND UP		NEW CONSTRUCTION	\$75	
OIL BURNER	\$30 AND UP		INDUSTRIAL	\$150	
PROPANE FURNACE	\$30 AND UP		MULTI-FAMILY	\$100	
UNDERGROUND STORAGE TANK	\$37.50 AND UP		RE-INSPECTION - PER OCCURRENCE	\$45	
L.P. GAS	\$75		FALSE ALARM	\$150 AND UP	
PLACE OF ASSEMBLY	\$45		BLASTING PERMIT - PER SITE	\$165	
FAMILY DAY CARE HOMES 1-6 CHILDREN	\$41.25		MASTER FIRE ALARM BOX	\$75 AND UP	

<b>LOCATION OF WORK:</b>	<b>MAP #:</b>	<b>LOT #:</b>	<b>BOX #:</b>
OCCUPANT:		UNIT #	
ADDRESS:		TELEPHONE #	

<b>APPLICANT INFORMATION:</b>			
YOUR NAME:		CELL / PAGER #	
COMPANY:		COMPANY TEL #	
ADDRESS:		EXPIRATION DATE	
CITY / STATE / ZIP:			

<b>CERTIFIED PERSON WORKING ON THE SYSTEM INFORMATION:</b>			
YOUR NAME:		CELL / PAGER #	
COMPANY:		COMPANY TEL #	
ADDRESS:		EXPIRATION DATE	
CITY / STATE / ZIP:			

<b>DESCRIPTION OF WORK:</b>	<b>** 2 SETS OF PLANS ARE REQUIRED**</b>

This application does not imply approval of the proposed work. The applicant shall be responsible for confirming final approval of the proposed work prior to starting any work which requires a permit from the Inspection Division. All work shall be in compliance with NFPA standards, State and Local Regulations. The applicant shall be responsible for scheduling final tests and inspections for any work performed immediately upon completion. The Inspection Division must also approve any changes to the previously approved conditions. Failure to provide the requested information will result in denial of the permit. All sections must be completed.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_